Case 18-70957-FJS Doc 1 Filed 03/21/18 Entered 03/21/18 17:01:35 Desc Main Document Page 1 of 50

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Magali First name Elena Middle name Fosse Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Magali Elena Mendez	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7797	

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Case number (if known)

Debtor 1 Magali Elena Fosse

		About Debtor 1:	Α	bout Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.		I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	В	usiness name(s)
		EINs	E	INs
5.	Where you live		lf	Debtor 2 lives at a different address:
		2392 Cape Arbor Drive Virginia Beach, VA 23451		
		Number, Street, City, State & ZIP Code	N	umber, Street, City, State & ZIP Code
		Virginia Beach Cit		
		County	С	ounty
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	in	Debtor 2's mailing address is different from yours, fill it here. Note that the court will send any notices to this ailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	N	umber, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	С	heck one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Magali Elena Fosse

Case number (if known)

Par	t 2: Tell the Court About	Your Ba	ankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are				n of each, see Notice Required by of page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankru e box.	ıptcy
	choosing to file under	■ Ch	napter 7				
		□ Ch	napter 11				
		☐ Ch	napter 12				
		☐ Ch	napter 13				
8.	How you will pay the fee		about how yo	u may pay. Туր attorney is sub	pically, if you are paying the fee yo	k with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, or alf, your attorney may pay with a credit card or che	money
					stallments. If you choose this option to (Official Form 103A).	n, sign and attach the Application for Individuals to	o Pay
						n only if you are filing for Chapter 7. By law, a judg ur income is less than 150% of the official poverty	
			applies to you	ur family size a	nd you are unable to pay the fee ir	installments). If you choose this option, you must	
			the <i>Application</i>	on to Have the	Chapter 7 Filing Fee Waived (Offic	ial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ No	·				
	last 8 years?	☐ Ye	S.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No	1				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	s.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
44	Da was want was		0- 1-1	in a 40			
11.	Do you rent your residence?	■ No					
		☐ Ye	s. Has yo	ur landlord obt	ained an eviction judgment agains	t you?	
				No. Go to line	12.		
				Yes. Fill out Ir. this bankrupto		<i>ludgment Against You</i> (Form 101A) and file it as p	art of

Debtor 1	Magali Elena Fosse	Document	f known)

art	3: Report About Any Bu	sinesses `	You Own	as a Sole Proprieto	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of busi	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code
	it to this petition.		Check	the appropriate box	to describe your business:
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in s, cash-flo	dicate that you are a ow statement, and fe	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am n	ot filing under Chapt	er 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter 1	1, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.
Parí	4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any				
	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is t	he hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs			ate attention is why is it needed?	
	immediate attention?		needed,	wity is it liceded?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
					Number, Street, City, State & Zip Code

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Debtor 1 Magali Elena Fosse

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 50 Case number (if known) Debtor 1 Magali Elena Fosse Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will be available for Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Magali Elena Fosse Signature of Debtor 2 Magali Elena Fosse Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on March 20, 2018

MM / DD / YYYY

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Debtor 1 Magali Elena Fosse Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Heather J. Silkstone	Date	March 20, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Heather J. Silkstone 85773		
Printed name		
The Merna Law Group, PC		
Firm name		
3419 Virginia Beach Blvd.		
#236		
Virginia Beach, VA 23452		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	
85773 VA		
Bar number & State		

		Docume	ent Page 8 of 50	<u> </u>	
Fill in this infor	mation to identify your	case:			
Debtor 1	Magali Elena Fos	sse			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Case number _					☐ Check if this is an
	4000				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	357,300.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	14,848.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	372,148.0
Pa⊦	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	326,724.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	78,608.0
	Your total liabilities	\$	405,332.00
aı	t 3: Summarize Your Income and Expenses		
١.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,687.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,257.00
aı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes What kind of debt do you have?		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Magali Elena Fosse

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,825.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clai	m
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in						Page 10 of 50				
	this information to	o identify	your case and th		ument					
Debtor	r 1 Mag	ali Elena		e Name		Last Name				
Debtor										
(Spouse,	, if filing) First Na	ame		Name		Last Name				
United	States Bankruptcy	Court for	the: EASTERN	DISTRI	CT OF VIRGI	NIA				
Case r	number					_				Check if this is an amended filing
Sch n each hink it f	fits best. Be as com	B: Pr	roperty escribe items. List accurate as possible	e. If two	married peopl	an asset fits in more than or e are filing together, both ar le top of any additional page	e equally resp	onsible for su	ıpplyi	ng correct
Part 1:	Describe Each Res	sidence, Bu	uilding, Land, or Ot	her Real	Estate You Ov	vn or Have an Interest In				
. Do yo	ou own or have any l	legal or eq	uitable interest in a	ny resid	ence, building	, land, or similar property?				
□ No	o. Go to Part 2.									
_										
■ Ye	es. Where is the prop	erty?								
■ Ye	es. Where is the prop	erty?								
	es. Where is the prop	erty?		What	'- the propert	200				
1.1	es. Where is the prop	ŕ		What		y? Check all that apply	Do not dod	···st acquired ele	cime o	er exemptions Dut
1.1 _ 2 :		Drive		What	Single-family Duplex or mu		the amount	of any secure	d clair	or exemptions. Put ms on Schedule D: cured by Property.
1.1 2 St	392 Cape Arbor	Drive	cription 23451-0000		Single-family Duplex or mu Condominium	home Iti-unit building	the amount	t of any secure Who Have Clain	ed clair ms Se Cui	ms on Schedule D:
1.1 2 St	392 Cape Arbor treet address, if available, Virginia Beach	Drive , or other desc			Single-family Duplex or mu Condominium Manufactured Land Investment pr	home Iti-unit building or cooperative or mobile home	Current va	t of any secure Who Have Clain	ed clair ms Se Cui	ns on Schedule D: cured by Property.
1.1 2 St	392 Cape Arbor treet address, if available, Virginia Beach	Drive or other desc	23451-0000		Single-family Duplex or mu Condominium Manufactured Land Investment pr Timeshare Other	home Iti-unit building or cooperative or mobile home	Current va entire prop	t of any secure Who Have Clain Ilue of the perty? 57,300.00 he nature of y	ed clair ms Se Cui por	ns on Schedule D: cured by Property. rrent value of the tion you own?
1.1 2 St	392 Cape Arbor treet address, if available, /irginia Beach ity	Drive or other described VA State	23451-0000		Single-family Duplex or mu Condominium Manufactured Land Investment pr Timeshare Other	home Iti-unit building or cooperative or mobile home	Current va entire prop	t of any secure Who Have Clair Ilue of the Derty? 57,300.00 the nature of yee simple, ten e), if known.	ed clair ms Se Cui por	rrent value of the tion you own? \$357,300.00 wnership interest
1.1 2. St. V Ci	392 Cape Arbor treet address, if available, /irginia Beach ity	Drive or other described VA State	23451-0000		Single-family Duplex or mu Condominium Manufactured Land Investment pr Timeshare Other has an interes Debtor 1 only Debtor 2 only	home Iti-unit building or cooperative or mobile home operty t in the property? Check one	Current va entire prop \$35 Describe ti (such as fe a life estat	t of any secure Who Have Clair Ilue of the Derty? 57,300.00 the nature of yee simple, ten e), if known.	ed clair ms Se Cui por	rrent value of the tion you own? \$357,300.00 wnership interest
1.1 2. St. V Ci	392 Cape Arbor treet address, if available, /irginia Beach ity	Drive or other described VA State	23451-0000		Single-family Duplex or mu Condominium Manufactured Land Investment pr Timeshare Other has an interes Debtor 1 only Debtor 2 only	home Iti-unit building or cooperative or mobile home operty t in the property? Check one	Current va entire prop \$35 Describe to (such as fe a life estat Fee Sim	t of any secure Who Have Clair Ilue of the Derty? 57,300.00 The nature of yee simple, ten The ple C if this is con	Cui por your o	rrent value of the tion you own? \$357,300.00 wnership interest by the entireties, or
1.1 2. St. V Ci	392 Cape Arbor treet address, if available, /irginia Beach ity	Drive or other described VA State	23451-0000		Single-family Duplex or mu Condominium Manufactured Land Investment pr Timeshare Other has an interes Debtor 1 only Debtor 2 only Debtor 1 and At least one of	home Iti-unit building or cooperative or mobile home operty t in the property? Check one Debtor 2 only of the debtors and another ou wish to add about this it	Current va entire prop \$35 Describe to (such as fe a life estate Fee sim)	t of any secure Who Have Clair Ulue of the Derty? 57,300.00 the nature of yellow simple, ten e), if known. ple c if this is constructions)	Cui por your o	rrent value of the tion you own? \$357,300.00 wnership interest by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Del		se 18-709 Nagali Elena		c 1 Filed 03/21/18 Entered 03/ Document Page 11 of 50 _{Cr}	21/18 17:	01:35 C	Desc Main
				hicles, motorcycles	aco riambor (# /		
3. C	ars, vans	, trucks, tracto	rs, sport utility ve	nicies, motorcycles			
] No						
	Yes						
3.1	Make:	Nissan		Who has an interest in the property? Check one			aims or exemptions. Put d claims on Schedule D:
	Model:	Murano		■ Debtor 1 only			ns Secured by Property.
	Year:	2007		☐ Debtor 2 only	Current va	alue of the	Current value of the
		mate mileage:	142,000	Debtor 1 and Debtor 2 only	entire pro	perty?	portion you own?
		formation:	D4 1	At least one of the debtors and another			
		based on NA n value	DA clean	☐ Check if this is community property (see instructions)		\$5,250.00	\$5,250.00
5 /				n for all of your entries from Part 2, including ar		.=>	\$5,250.00
•	Jages you	nave attached	Tiol I all 2. Wille	triat number nere	••••••	·- L	
Par	3: Descri	be Your Person	al and Household Ite	ems			
Do	you own	or have any leç	gal or equitable in	terest in any of the following items?		ŗ	Current value of the cortion you own? On not deduct secured claims or exemptions.
[, ,,		, china, kitchenware			
		-					
			located at debto	nousehold goods, furnishings and other ite or's residence. pased on debtor's estimate of replacement			
			Bed \$400, 3 Che Chairs \$120, 1 E Vacuum \$50, 1 Dishwasher \$40	Sofa \$150, 1 Coffee Table \$20, 6 End Tablest of Drawers \$150, 1 Dining Table \$100, 6 Buffet \$75, 1 Washing Machine \$100, 1 Fan Refrigerator \$300, 1 Stove \$150, 1 Microwa D, 7 Lamps \$175, 45 Silverware \$23, 50 Dishns \$20, 3 Pictures \$60, 25 Books \$75, 1 Dry	5 Dining \$25, 1 ave \$30, 1 hes \$50,		\$2,463.00
[Electronics Examples: ☐ No ■ Yes. De	Televisions and including cell p		eo, stereo, and digital equipment; computers, printe nedia players, games	ers, scanners; r	nusic collectio	ons; electronic devices
				s located at debtor's residence. pased on debtor's estimate of replacement	value of		
			1 Computer \$60 \$50, 2 Phone \$3), 1 Radio \$5, 2 CD Player \$30, 4 TV \$425, 2 90,	VCR		\$600.00

Debtor	Case 18-70 Magali Elen		Doc 1		Entered 03/21/18 1 age 12 of 50 Case number		Desc Main
Dobioi	iviagali Lieli	a i 055e				(11 Kilowii)	
Exa	other collect	d figurines; pair ions, memorab			pictures, or other art objects; sta	ımp, coin, or	baseball card collections;
■ N □ Y	o es. Describe						
	pment for sports a mples: Sports, phot musical inst	ographic, exerc	sise, and othe	er hobby equipment; bicy	cles, pool tables, golf clubs, skis	; canoes and	kayaks; carpentry tools;
■ N □ Y	o es. Describe						
10. Fire Ex	amples: Pistols, rifle	es, shotguns, ar	mmunition, a	nd related equipment			
	es. Describe						
11. Clo <i>Ex</i> □ N	<i>amples:</i> Everyday c	lothes, furs, lea	ither coats, d	lesigner wear, shoes, ac	cessories		
■ Y	es. Describe	Minnellen			delicante medidante Melica	1	
					debtor's residence. Value placement value of the		\$500.00
■ Y	es. Describe				s residence. Value listed is nt value of the property.		\$45.00
Ex	n-farm animals amples: Dogs, cats,	birds, horses					
■ N □ Y	es. Describe						
■ N	0		items you di	id not already list, inclu	ıding any health aids you did n	ot list	
ЦΥ	es. Give specific in	formation					
				Part 3, including any e	entries for pages you have atta	ched	\$3,608.00
	Describe Your Fina		ble interest	in any of the following	?		Current value of the
20 ,00	. com or mare any	logal of oquito		a, oo .oog			portion you own? Do not deduct secured claims or exemptions.
	<i>amples:</i> Money you o		-	home, in a safe deposit	box, and on hand when you file y	our petition	
					Cash on	hand	\$10.00

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Case number (if known) Document Debtor 1 Magali Elena Fosse 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Account with 4976 Towne Bank with 17.1. Checking **Daughter** \$900.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **IRA** Retirement plan through employer. \$5.075.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit □ No Yes. Give specific information about them... \$1.00 Contingent inheritance 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information about them...

De	ebtor 1	Magali Elena Fosse		C	ase number (if known)	
27.		es, franchises, and other gene les: Building permits, exclusive	eral intangibles licenses, cooperative association holdings	, liquor license	es, professional licenses	
	_	Give specific information about	them			
M	oney or p	roperty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	□ No	unds owed to you Give specific information about t	hem, including whether you already filed th	he returns and	d the tax years	
			Anticipated refund from debtors returns, estimated pro-rata. Debtor will owe taxes for 20		Federal	\$1.00
			Anticipated refund from debtors returns, estimated pro-rata. Debtor will owe taxes for 20°		State	\$1.00
	Other a Example No Yes. Interest Example	benefits; unpaid loans you do not be specific information s in insurance policies	surance payments, disability benefits, sick made to someone else urance; health savings account (HSA); cred			
	□ No ■ Yes. N	Name the insurance company o Company		Beneficiary	<i>y</i> :	Surrender or refund value:
			e insurance policy with John k. No cash surrender value.	Raphael Hartman	Otero, Lauren	\$1.00
32.	If you a someor		ou from someone who has died st, expect proceeds from a life insurance p	olicy, or are c	urrently entitled to receiv	re property because
33.	Example No	les: Accidents, employment disp	or not you have filed a lawsuit or made outes, insurance claims, or rights to sue	a demand fo	or payment	
n 4		Describe each claim		ololme -f41-	alahtan anal sisihta (at off alaima
	□ No		aims of every nature, including counter	ciaims of the	e debtor and rights to s	et off cialms
	■ Yes.	Describe each claim				

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Case number (if known) Document Debtor 1 Magali Elena Fosse \$1.00 Future wages 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$5,990.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00

Par	List the Totals of Each Part of this	Form				
55.	. Part 1: Total real estate, line 2					\$357,300.00
56.	. Part 2: Total vehicles, line 5			\$5,250.00	_	
57.	. Part 3: Total personal and household	d items, line 15		\$3,608.00		
58.	. Part 4: Total financial assets, line 36			\$5,990.00		
59.	. Part 5: Total business-related proper	rty, line 45		\$0.00		
60.	. Part 6: Total farm- and fishing-relate	d property, line 52		\$0.00		
61.	. Part 7: Total other property not listed	d, line 54	+	\$0.00		
62.	. Total personal property. Add lines 56	through 61		\$14,848.00	Copy personal property total	\$14,848.00
63.	. Total of all property on Schedule A/E	3. Add line 55 + line 62	2			\$372,148.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:			
Debtor 1	Magali Elena Fos	se			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	DF VIRGINIA		
Case number					
(if known)				☐ Check if this is amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

 Brief description of the property and line on _____Current value of the ____Amount of the exemption you claim

Schedule A/B that lists this property	portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2392 Cape Arbor Drive Virginia Beach, VA 23451 Virginia Beach Cit County Value based on CMA less 10% for cost of sale Line from <i>Schedule A/B</i> : 1.1	\$357,300.00		\$3,440.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
2007 Nissan Murano 142,000 miles Value based on NADA clean trade-in	\$5,250.00		\$5,250.00	Va. Code Ann. § 34-26(8)
value based on NADA clean trade-in value Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2007 Nissan Murano 142,000 miles Value based on NADA clean trade-in	\$5,250.00		\$1.00	Va. Code Ann. § 34-4
value Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Miscellaneous household goods, furnishings and other items located	\$2,463.00		\$2,463.00	Va. Code Ann. § 34-26(4a)
at debtor's residence. Value listed is based on debtor's estimate of replacement value of the property.			100% of fair market value, up to any applicable statutory limit	
3 Chairs \$150, 1 Sofa \$150, 1 Coffee Table \$20, 6 End Table \$100, 4 Bed \$400, 3 C Line from <i>Schedule A/B</i> : 6.1				
Electronic items located at debtor's residence.	\$600.00		\$600.00	Va. Code Ann. § 34-4
Value listed is based on debtor's estimate of replacement value of the property.			100% of fair market value, up to any applicable statutory limit	
1 Computer \$60, 1 Radio \$5, 2 CD Player \$30, 4 TV \$425, 2 VCR \$50, 2 Phone \$30, Line from <i>Schedule A/B</i> : 7.1				
Miscellaneous wearing apparel listed at debtor's residence. Value listed is	\$500.00		\$500.00	Va. Code Ann. § 34-26(4)
based on debtor's estimate of replacement value of the property. Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Miscellaneous jewelry located at debtor's residence. Value listed is	\$45.00		\$45.00	Va. Code Ann. § 34-4
based on debtor's estimate of replacement value of the property. Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
Cash on hand Line from Schedule A/B: 16.1	\$10.00		\$10.00	Va. Code Ann. § 34-4
Line nom Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
Checking: Account with 4976 Towne Bank with Daughter	\$900.00		\$900.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
IRA: Retirement plan through employer.	\$5,075.00		\$5,075.00	Va. Code Ann. § 34-34
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
Contingent inheritance Line from Schedule A/B: 25.1	\$1.00		\$1.00	Va. Code Ann. § 34-4
LINE HOLLI SCHEUUIE AVD. 4J. I			100% of fair market value, up to	

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	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption.			Specific laws that allow exemption	
	Federal: Anticipated refund from debtors 2017 tax returns, estimated	\$1.00		\$1.00	Va. Code Ann. § 34-4	
	pro-rata. Debtor will owe taxes for 2017 Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit		
	State: Anticipated refund from debtors 2017 tax returns, estimated	\$1.00		\$1.00	Va. Code Ann. § 34-4	
	pro-rata. Debtor will owe taxes for 2017 Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit		
	Term life insurance policy with John Hancock. No cash surrender value.	\$1.00		\$1.00	Va. Code Ann. § 38.2-3122	
	Beneficiary: Raphael Otero, Lauren Hartman Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit		
	Future wages Line from Schedule A/B: 34.1	\$1.00		\$1.00	Va. Code Ann. § 34-4	
L	Line Holli Schedule AVD. 34.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustme	nt.)	
	No					
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?	

3	Are you	claiming a	homestead	exemption of	more than	\$160.375?
J.	AIC YOU	Ciallilling a	Homestead	CACILIPLION OF	more man	Ψ 1 OO, O 1 O 1

- No
- Yes

	Document	Page 19 of 50		
Fill in this information to identify you	ur case:			
Debtor 1 Magali Elena Fo	osse			
First Name		Last Name	-	
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name	-	
(Spouse II, IIIIIIg)				
United States Bankruptcy Court for the	: EASTERN DISTRICT OF VIRGIN	NIA	-	
Case number				
(if known)			☐ Check	if this is an
			ameno	ded filing
Official Form 106D				
	. M/I - 11 Ol-! O			
Schedule D: Creditors	s who have Claims S	ecured by Propert	<u>y</u>	12/15
Be as complete and accurate as possible. is needed, copy the Additional Page, fill it number (if known).				
1. Do any creditors have claims secured b	y your property?			
☐ No. Check this box and submit t	his form to the court with your other so	chedules. You have nothing else	to report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
	more than one accurred claim list the gradit	Column A	Column B	Column C
List all secured claims. If a creditor has for each claim. If more than one creditor ha much as possible, list the claims in alphabet	s a particular claim, list the other creditors in		Value of collateral that supports this claim	Unsecured portion If any
2.1 BB&T *	Describe the property that secures the		\$357,300.00	\$0.00
Creditor's Name	2392 Cape Arbor Drive Virgini			
	Beach, VA 23451 Virginia Bea	ach Cit		
	County Value based on CMA less 10%	6 for		
R MATTHEW HALL	cost of sale	0 101		
823 E MAIN ST 11TH FLR	As of the date you file, the claim is: Ch	eck all that		
Richmond, VA 23219	apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mo car loan)	ortgage or secured		
Debtor 2 only	•			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Statutory lien (such as tax lien, mecha	anic's lien)		
Check if this claim relates to a	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) ☐ ■	quity Line of Credit		
community debt	Other (including a right to offset)			
Date debt was incurred 6/2008	Last 4 digits of account number	r _1084		
2.2 BB&T *	Describe the property that secures the	e claim: \$252,398.00	\$357,300.00	\$0.00
Creditor's Name	2392 Cape Arbor Drive Virgini			
	Beach, VA 23451 Virginia Bea	ach Cit		
	Value based on CMA less 10%	% for		
R MATTHEW HALL	cost of sale			
823 E MAIN ST 11TH FLR	As of the date you file, the claim is: Chapply.	eck all that		
Richmond, VA 23219	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mo car loan)	ortgage or secured		
Debtor 2 only	•			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Statutory lien (such as tax lien, mecha	anic's lien)		

Official Form 106D

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Debtor 1	Magali Ele	agali Elena Fosse			Case number (if know)	
	First Name	Middle Nam	e Last Name			
	if this claim re unity debt	elates to a	Other (including a right to offset)	Mortgage		
Date debt was incurred 9/2010 Last 4 digits of account numb				1ber 2308		
Add the	dollar value of	f your entries in Col	umn A on this page. Write that nur	nber here:	\$326,724.0	00
	the last page		e dollar value totals from all pages	i.	\$326,724.0	00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Ous	0 10 10001 100	Docume	ent Page 2	1 of 50	.01.00	COO IVICIII
Fill in this infor	mation to identify your					
Debtor 1	Magali Elena Foss	se				
	First Name	Middle Name	Last Name			
Debtor 2	First Name	Middle Name	Last Name			
(Spouse if, filing)	First Name					
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT (OF VIRGINIA			
Case number						
(if known)						heck if this is an
					a	mended filing
Official For	m 106E/F					
	E/F: Creditors W	ho Have Unsec	ured Claims			12/15
				Part 2 for creditors with NO	NPRIORITY clair	ms. List the other party to
Schedule D: Credi left. Attach the Co name and case nu	itors Who Have Claims Sec ntinuation Page to this pag ımber (if known).	ured by Property. If more s e. If you have no informati	pace is needed, copy	any creditors with partially the Part you need, fill it out do not file that Part. On the	, number the ent	ries in the boxes on the
	All of Your PRIORITY Un					
_ `	tors have priority unsecure	d claims against you?				
No. Go to	Part 2.					
Yes.						
	All of Your NONPRIORIT					
	tors have nonpriority unsec					
☐ No. You ha	ave nothing to report in this pa	art. Submit this form to the co	ourt with your other sch	edules.		
Yes.						
unsecured cla	im, list the creditor separately	for each claim. For each cla	im listed, identify what	b holds each claim. If a cred type of claim it is. Do not list of three nonpriority unsecured	laims already inc	luded in Part 1. If more
						Total claim
4.1 Americ	can Airlines MC	Last 4 digit	s of account number	2719		\$9,283.00
•	ty Creditor's Name	When wee	the debt incurred?	2045		
	X 13337 elphia, PA 19101	when was	ine debi incurred?	2015		
	Street City State Zlp Code	As of the d	ate you file, the claim	is: Check all that apply		
	urred the debt? Check one.					
Debto	or 1 only	☐ Continge	ent			
☐ Debto	or 2 only	☐ Unliquid	ated			
☐ Debto	or 1 and Debtor 2 only	☐ Disputed				
	st one of the debtors and and		NPRIORITY unsecure	d claim:		
☐ Chec debt	k if this claim is for a comr	, <u> </u>				
	aim subject to offset?	☐ Obligation report as pri		aration agreement or divorce	tnat you did not	
■ No	-		•	ng plans, and other similar del	ots	
☐ Yes		Other. S	pecify Consumer	Debt		

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Jebic	Magail Elena Fosse		Case number (if know)	
4.2	Arbors at Cape Hentry Condomin	Last 4 digits of account number		\$314.00
	Nonpriority Creditor's Name 4605 Pembroke Lake Circle Ste. 302	When was the debt incurred?	2018	
	Virginia Beach, VA 23455			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Consumer	Debt	
4.3	Bank of America	Last 4 digits of account number		\$11,134.00
	Nonpriority Creditor's Name	_		
	P.O. Box 982238	When was the debt incurred?	4/1996	
	El Paso, TX 79998 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Consumer	Debt	
4.4	Barclays Bank Delaware	Last 4 digits of account number	8115	\$9,283.00
	Nonpriority Creditor's Name PO BOx 8803	When was the debt incurred?	5/2006	
	Wilmington, DE 19899 Number Street City State Zlp Code	_ As of the date you file, the claim	ie: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Offeck all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	■ Other Specify Consumer		
	55	- Other Specify		

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Debt	or 1 Magali Elena Fosse		Case number (if know)					
4.5	Bayview Physician Services	Last 4 digits of account number	0310	\$66.00				
	Nonpriority Creditor's Name	_		*****				
	P.O. Box 7068	When was the debt incurred?	7/2017					
	Portsmouth, VA 23707		tra Ol . I . II II I					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Medical Se	rvices					
4.6	BB&T	Last 4 digits of account number	3044	\$7,605.00				
	Nonpriority Creditor's Name	_						
	P.O. Box 1847	When was the debt incurred?	2/1999					
	Wilson, NC 27896 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.	As of the date you me, the claim	з. Спеск ан тат арргу					
	_	☐ Contingent						
	Debtor 1 only							
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure						
	☐ Check if this claim is for a community	☐ Student loans						
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Consumer	Debt					
4.7	BB&T	Last 4 digits of account number	3078	\$1,208.00				
	Nonpriority Creditor's Name		0.0000					
	P.O. Box 1847 Wilson, NC 27896	When was the debt incurred?	8/2000					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	, i.e. c. i.i.e date , cae, i.i.e c.a	or onook all that apply					
	■ Debtor 1 only	☐ Contingent						
	_	☐ Debtor 2 only ☐ Unliquidated						
	•	☐ Debtor 1 and Debtor 2 only ☐ Disputed						
		Type of NONPRIORITY unsecure	d claim:					
	☐ At least one of the debtors and another	Student loans						
	☐ Check if this claim is for a community debt							
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts					
	□Yes	■ Other Specify Consumer	Debt					
	••	- Unier Specify	—					

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Magail Elena Fosse	Case number (if know)	
BB&T	Last 4 digits of account number 0054	\$14,056.00
P.O. Box 1847	When was the debt incurred? 3/1999	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
	•	
	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did n report as priority claims	ot
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Consumer Debt	
Capital One	Last 4 digits of account number 2607	\$3,298.00
P.O. Box 30285	When was the debt incurred? 11/2015	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	Contingent	
Debtor 2 only		
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did n report as priority claims	ot
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Consumer Debt	
Chase Card	Last 4 digits of account number 5407	\$9,249.00
Nonpriority Creditor's Name P.O. Box 15298	When was the debt incurred? 7/2005	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	Contingent	
	•	
	·	
	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did n report as priority claims	ot
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Consumer Debt	
	BB&T Nonpriority Creditor's Name P.O. Box 1847 Wilson, NC 27894 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Capital One Nonpriority Creditor's Name P.O. Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Chase Card Nonpriority Creditor's Name P.O. Box 15298 Wilmington, DE 19850-5298 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Chase Card Nonpriority Creditor's Name P.O. Box 15298 Wilmington, DE 19850-5298 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	BB&T Nonpriority Creditor's Name P.O. Box 1847 When was the debt incurred? 3/1999 As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 only Capital One Nonpriority Creditor's Name P.O. Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 only Check if this claim is for a community debt State Card Nonpriority Creditor's Name P.O. Box 30285 Salt Lake City, UT 84130 No Debtor 1 only Debtor 1 only Check if this claim is for a community debt State Card Nonpriority Creditor's Name P.O. Box 15298 Number Street City State Zip Code Who incurred the debtors and another Check if this claim is for a community debt Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 7 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only D

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1 Magali Elena Fosse		Case number (if know)	
Chase Card	Last 4 digits of account number	0207	\$6,863.00
Nonpriority Creditor's Name P.O. Box 15298	When was the debt incurred?	6/2016	
Wilmington, DE 19850-5298 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Consumer	Debt	
Orange Lake Country Club, Inc.	Last 4 digits of account number		\$69.00
Nonpriority Creditor's Name 8505 W. Irlo Bronson	When was the debt incurred?	2017	
Memorial Highway Kissimmee, FL 34747			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Consumer	Debt	
Sears/CBNA	Last 4 digits of account number	3258	\$1,424.00
Nonpriority Creditor's Name	_		
PO Box 6283 Sioux Falls, SD 57117	When was the debt incurred?	10/2016	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.	•	,	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	■ Other. Specify Consumer	Debt	
	- Other. opening		

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-	NCB/Sam		Last 4 digits of account number	2514		\$3,922.00
РО	Box 9650	05	When was the debt incurred?	10/20	116	
	lando, FL	ty State Zlp Code	As of the date you file, the claim	is: Check	all that apply	
		e debt? Check one.	7.6 of the date yearine, the olam	. IO. OHOOK	tall that apply	
= [Debtor 1 only		☐ Contingent			
	Debtor 2 only		☐ Unliquidated			
	Debtor 1 and	Debtor 2 only	☐ Disputed			
		f the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
_		claim is for a community	☐ Student loans			
deb		ject to offset?	Obligations arising out of a sepreport as priority claims	paration ag	reement or divorce that you did not	
I	No -		Debts to pension or profit-shar	ing plans, a	and other similar debts	
	Yes		Other Specify Consumer	Debt		
4.1 5 WF	CRD SVC		Last 4 digits of account number	9098		\$834.00
Non Po	Box 1451	7	When was the debt incurred?	6/199	94	
Num		ty State Zlp Code e debt? Check one.	As of the date you file, the claim	is: Check	all that apply	
_ `	Debtor 1 only		☐ Contingent			
_	Debtor 2 only		☐ Unliquidated			
_	Debtor 1 and	Debtor 2 only	☐ Disputed			
_		f the debtors and another	Type of NONPRIORITY unsecure	ed claim:		
		claim is for a community	☐ Student loans			
deb	t			aration ag	reement or divorce that you did not	
	-	ject to offset?	report as priority claims Debts to pension or profit-shar	ing plane	and other similar debts	
_ '					and other similar debts	
L 1	res		Other. Specify Consumer	Dent		
. Use this pa	age only if yo	u have others to be notified a	bt That You Already Listed about your bankruptcy, for a debt that			
have more	than one cre		omeone else, list the original creditor i it you listed in Parts 1 or 2, list the add or submit this page.			
Name and Ad	ddress Cohen As	2000 l td	On which entry in Part 1 or Part 2 did yo		9	
	man Rd St			_	Creditors with Priority Unsecured Claims	
Newark, D				■ Part 2: 0	Creditors with Nonpriority Unsecured Cla	ums
			Last 4 digits of account number	32	203	
Part 4:	Add the Am	ounts for Each Type of U	nsecured Claim			
	mounts of co secured clair		ims. This information is for statistical	reporting	purposes only. 28 U.S.C. §159. Add th	ne amounts for each
		-			Total Claim	
Total claims		Domestic support obligation	S	6a.	\$	
from Part 1		Taxes and certain other debt	s you owe the government	6b.	\$	
		· ·	injury while you were intoxicated	6c.	\$ 0.00	
	6d.	Other. Add all other priority uns	secured claims. Write that amount here.	6d.	\$	
	6e.	Total Priority. Add lines 6a thr	ough 6d.	6e.	\$ 0.00	
		,	5 .	-	<u> </u>	
					Total Claim	

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Debtor 1 N	/lagali El	ena Fosse	Case	number (if know)	
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2		Obligations arising out of a separation agreement or divor you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar	r debts 6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that a here.	mount 6i.	\$	78,608.00

Total Nonpriority. Add lines 6f through 6i.

78,608.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Magali Elena Fos	sse		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number				
(if known)				☐ Check if this
				amended fili

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	_
	•				

		Docume	ent Page 29 o	ot 50	
Fill in this	information to identify your	case:			
Debtor 1	Magali Elana Eas				
Debiori	Magali Elena Fos	Middle Name	Last Name		
Debtor 2					
(Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA		
Ormod Oto	noo Barin aproy Court for the.				
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
Sched	lule H: Your Cod	lebtors			12/15
					e as possible. If two married
Codebtors	are people or entities who a	are also liable for any deb	ts you may have. Be a	as complete and accurate	e as possible. If two married
					eded, copy the Additional Page, of any Additional Pages, write
	and case number (if known				,
4 Da	vev hove ony sedebters? (If	filian a laint ann	daat liat aith an an aa.		
1. DO	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codeptor.	
■ No					
☐ Yes	5				
	hin the last 8 years, have yo				states and territories include
Arizor	na, California, Idaho, Louisiana	a, Nevada, New Mexico, Pu	erto Rico, Texas, Wasr	nington, and Wisconsin.)	
No	. Go to line 3.				
	s. Did your spouse, former spo	nuse or legal equivalent live	with you at the time?		
— 100	s. Dia your spouse, former spe	rase, or legal equivalent live	o with you at the time.		
					with you. List the person shown creditor on Schedule D (Official
					chedule E/F, or Schedule G to fill
	olumn 2.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
	Column 1: Your codebtor			Column 2: The grad	itor to whom you owe the debt
	Name, Number, Street, City, State and 2	ZIP Code		Check all schedules	
					,
3.1				Schedule D, line	
	Name			☐ Schedule E/F, line	e
				☐ Schedule G, line	
-	Number Street				
	City	State	ZIP Code		
				По	
3.2	Name			Schedule D, line	
	Ivanio			☐ Schedule E/F, line	e
				☐ Schedule G, line	
	Number Street				
	City	State	ZIP Code		

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Fill	in this information to identify your c	ase:							
Del	btor 1 Magali Elen	a Fosse							
	btor 2				_				
Uni	ited States Bankruptcy Court for the	: EASTERN DISTRICT	OF VIRGINIA						
(If kr	se number		-						oter
	fficial Form 106I					MM / DD/ Y	YYYY		
S	chedule I: Your Inc	ome							12/15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	are married and not fili Ir spouse is not filing w	ng jointly, and your ith you, do not inclu	spouse i	is liv mati	ing with you, incl on about your sp	ude information	on about your space is need	r led,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filing	spouse	
	If you have more than one job,	Employment status	☐ Employed			■ Empl	oyed		
	attach a separate page with information about additional	Employment status	■ Not employed			☐ Not e	☐ Not employed		
	employers.	Occupation	Retired						
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						-
Pai	rt 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. f	you have nothing to r	eport for	any	line, write \$0 in the	space. Include	your non-filin	ıg
	ou or your non-filing spouse have mo		ombine the information	n for all e	empl	oyers for that perso	on on the lines	below. If you n	need
						For Debtor 1	For Debtor non-filing s		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	

4. Calculate gross Income. Add line 2 + line 3.

0.00

0.00

Deb	tor 1	Magali Elena Fosse	_	Case	number (if known)				
				For	Debtor 1		Debtor 2 or		
	Cor	ny lina 4 hara	4.	\$	0.00	nor \$	า-filing spoเ		
	Cor	by line 4 here	4.	Φ_	0.00	Φ_		0.00	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	(0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	(0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	(0.00	
	5e.	Insurance	5e.	\$	0.00	\$		0.00	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$_		0.00	
	5g.	Union dues	5g.	*_ * *	0.00			0.00	
_	5h.	Other deductions. Specify:	_ 5h.+	· —	0.00			0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ _	0.00	\$_		0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$_		0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$_	0.00	\$_		0.00	
	8b.	Interest and dividends	8b.	\$_	0.00	\$_		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	(0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	(0.00	
	8e.	Social Security	8e.	\$	1,922.00	\$	(0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	(0.00	
	8g.	Pension or retirement income	 8g.	\$	1,765.00	\$		0.00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	(0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,687.00	\$_		0.00	
10	Cal	culate monthly income. Add line 7 + line 9.	10. \$		3,687.00 + \$		0.00 = 3	\$;	3,687.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			3,007.00 · \$\psi			· —	3,007.00
11.	Stat Incli	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depen		•		Schedule J. 11. +\$	 S	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$		3,687.00
								mbine	ed income
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?				Ш	, iiiiiiy	HICOHIE
		Yes. Explain: Income from tax overpayment = ((last year's tax refund) - 1,000) / 12							

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	in this informs	tion to inlantify							
		tion to identify yo	our case:						
Deb	tor 1	Magali Elena	Fosse				k if this is:		
Deb	tor 2					_	An amended filing A supplement shov	ving postpetition chapter	
(Spc	ouse, if filing)						13 expenses as of		
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA							MM / DD / YYYY		
Cas	e number								
l	nown)								
Οſ	fficial Fo	rm 106J							
		J: Your			a filia a ta aathaa ha	-th		12/	15
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this i n.					
Par	t 1: Descr	ibe Your House	ehold						
1.	Is this a joir	nt case?							
	■ No. Go to		in a senar	ate household?					
	□ N		ш а эсран	ate nousenoia.					
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debt	or 2.		
2.	Do you have	e dependents?	■ No						
	Do not list Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state	the						□ No	
	dependents	names.						☐ Yes	
								□ No	
								☐ Yes ☐ No	
								⊔ No □ Yes	
								□ No	
								☐ Yes	
3.		enses include		No					
		f people other t d your depende	han $_{\square}$	Yes					
	yoursen and	u your depende	iiio i						
Par		ate Your Ongoi							
exp				uptcy filing date unless y y is filed. If this is a supp)
Incl	lude expense	s paid for with	non-cash	government assistance it	f you know				
the		h assistance an		cluded it on Schedule I: Y			Your expe	enses	
(0		,							
4.		or home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgage	4. \$		1,527.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a. \$		317.00	
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b. \$		131.00	
				upkeep expenses		4c. \$		0.00	
_		owner's associat			ma aquitulares	4d. \$ 5. \$		146.00	
IJ.	AUGITIONALI	nortuaue pavmo	enis ioi vo	our residence , such as ho	me equity loans	ე. გ		719 00	

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Debtor 1 Magali E	lena Fosse	Case num	ber (if known)	
6. Utilities:				
	heat, natural gas	6a.	\$	190.00
•	ver, garbage collection	6b.		103.00
	e, cell phone, Internet, satellite, and cable services	6c.	·	214.00
6d. Other. Spe		6d.	·	0.00
	ekeeping supplies	7.		375.00
	hildren's education costs	8.	\$	0.00
	ry, and dry cleaning	9.	\$	50.00
<u>-</u> .	roducts and services	10.	· ·	
•			·	130.00
1. Medical and der	•	11.	\$	30.00
Z. Transportation. Do not include ca	Include gas, maintenance, bus or train fare.	12.	\$	200.00
	clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	ributions and religious donations	14.	·	0.00
5. Insurance.	indutions and religious donations	14.	Ψ	0.00
	surance deducted from your pay or included in lines 4 or 20.			
15a. Life insura		15a.	\$	0.00
15b. Health insi		15b.	·	0.00
15c. Vehicle ins		15c.	·	98.00
15d. Other insu		15d.		0.00
	clude taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	onal property taxes, tags, etc.	16.	\$	27.00
7. Installment or le				
17a. Car payme		17a.	*	0.00
17b. Car payme	ents for Vehicle 2	17b.	\$	0.00
17c. Other. Spe	ecify:	17c.	\$	0.00
17d. Other. Spe	ecify:	17d.	\$	0.00
	of alimony, maintenance, and support that you did not report		•	0.00
	your pay on line 5, Schedule I, Your Income (Official Form 106	I). 18.		0.00
	s you make to support others who do not live with you.		\$	0.00
Specify:		19.	_	
	erty expenses not included in lines 4 or 5 of this form or on So			2.00
	s on other property	20a.	· ·	0.00
20b. Real estat		20b.		0.00
	nomeowner's, or renter's insurance	20c.		0.00
	ce, repair, and upkeep expenses	20d.		0.00
20e. Homeown	er's association or condominium dues	20e.	\$	0.00
1. Other: Specify:		21.	+\$	0.00
2. Calculate your r	monthly expenses			
22a. Add lines 4	•		\$	4.257.00
	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$.,
	a and 22b. The result is your monthly expenses.		\$	A 257 00
ZZU. MUU IIITE ZZ	a and ZZD. The result is your monthly expenses.		Ψ	4,257.00
Calculate your r	monthly net income.			
23a. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	3,687.00
	monthly expenses from line 22c above.	23b.	-\$	4,257.00
				· ·
	our monthly expenses from your monthly income.	23c.	\$	-570.00
The result	is your monthly net income.	236.	Ψ	3,3,00
24. Do you expect a	an increase or decrease in your expenses within the year after	you file this	form?	
For example, do yo	u expect to finish paying for your car loan within the year or do you expect y			e or decrease because o
	terms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Magali Elena Fos				
Debter 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Form	m 106Dec				
		ا د داد اداد اداد ما	Dabterle C	ah adıılas	
Declara	tion About a	<u>ın Individual</u>	Deproi 2 20	<u>cheaules</u>	12/15
Sig	ın Below				
		one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules fil	ed with this declaration	on and
X /s/ Ma	gali Elena Fosse		X		
Magal	i Elena Fosse ire of Debtor 1		Signature o	of Debtor 2	
Date	March 20, 2018		Date		

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Filli	n this inform	nation to identify you	r case:			
Debt		Magali Elena Fo				
200	.01 1	First Name	Middle Name	Last Name		
Debt (Spou	tor 2 se if, filing)	First Name	Middle Name	Last Name		
	-	nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
		., .,				
(if kno	e number wn)				_	Check if this is an amended filing
Sta Be as	s complete a	of Financial	ble. If two married people a		ankruptcy equally responsible for sup	
		i). Answer every ques	•	uns form. On the top of any	y additional pages, write yo	ui name and case
Part			rital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	■ Married■ Not married	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do n	ot include where you live now	<i>I</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territor ico, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explain	n the Sources of You	r Income			
	Fill in the tota	I amount of income yo	u received from all jobs and a	ng a business during this you all businesses, including part e together, list it only once ur		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Debtor 1 Magali Elena Fosse

				5					
				Debtor 1		Debtor 2			
For the calendar year before that: (January 1 to December 31, 2016)		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		■ Wages, commissions, bonuses, tips	\$56,923.00	☐ Wages, commissions, bonuses, tips					
				☐ Operating a business		☐ Operating a business			
	r the calend anuary 1 to	dar year: December 31,	2015)	■ Wages, commissions, bonuses, tips	\$111,403.00	☐ Wages, commissions, bonuses, tips			
				☐ Operating a business		☐ Operating a business			
	and other winnings. List each s	public benefit parting a	ayments; a joint cas gross inco	pensions; rental income; inte se and you have income that	amples of other income are a rest; dividends; money collect you received together, list it outlety. Do not include income the	ted from lawsuits; royalties; ar nly once under Debtor 1.			
				Debtor 1		Debtor 2			
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)		
From January 1 of current year until the date you filed for bankruptcy:		Pension	\$3,528.00						
				SSI Benefits	\$3,844.00				
	r last calen anuary 1 to	dar year: December 31,	2017)	Pension	\$14,112.00				
				SSI Benefits	\$16,160.00				
Pa	rt 3: List	Certain Paym	ents You	Made Before You Filed for	Rankruntev				
		•			· •				
6.	□ No.	Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."							
		– ~	days befo		id you pay any creditor a total	of \$6,425* or more?			
		pa	aid that cr	editor. Do not include payme	id a total of \$6,425* or more into for domestic support oblig				
		* Subject to a	djustmen	payments to an attorney for t t on 4/01/19 and every 3 year	s after that for cases filed on	or after the date of adjustmen	t.		
	Yes.			r both have primarily consure you filed for bankruptcy, d	umer debts. id you pay any creditor a total	of \$600 or more?			
		■ No. G	o to line 7						
		in	clude pay		id a total of \$600 or more and bligations, such as child supp				

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	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partners partners of their voting	erships of which you	u are a genera ny managing a	al partner; corporations gent, including one for
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi No		ments or transfer a	any property on ac	ecount of a de	ebt that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title	ey, were you a party in an cases, small claims action: Nature of the case	y lawsuit, court ac s, divorces, collection Court or agency	tion, or administra in suits, paternity a	ative proceed ctions, support	t or custody
	Case number					
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	hed, attached	I, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	d .			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details.		luding a bank or fii	nancial institution	, set off any a	mounts from your
		Describe the action the	oroditor took	Data	notion was	Amount
	Creditor Name and Address	Describe the action the	creditor took	taken	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes		erty in the possess	ion of an assigned	e for the bene	efit of creditors, a

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Debtor 1 Magali Elena Fosse

Pa	rt 5: List Certain Gifts and Contribution	ıs						
13.	■ No							
	 Yes. Fill in the details for each gift. Gifts with a total value of more than \$60 per person 	0	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankro ■ No	uptcy,	did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?			
	☐ Yes. Fill in the details for each gift or ce	ontribu	tion.					
	Gifts or contributions to charities that t more than \$600 Charity's Name		Describe what you contributed	Dates you contributed	Value			
	Address (Number, Street, City, State and ZIP Code	e)						
Pa	rt 6: List Certain Losses							
15.	within 1 year before you filed for bankrulor gambling? ■ No □ Yes. Fill in the details.	ptcy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,			
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
		IIISUIa	nce claims on line 33 of Schedule A/B. Property.					
Pa	rt 7: List Certain Payments or Transfers	5						
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou′	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	The Merna Law Group, P.C. 3419 Virginia Beach Blvd., #236 Virginia Beach, VA 23452		\$1473.00 attorney fees (includes \$73.00 for homestead deed preparation) and \$362.00 filing fee and costs (includes \$27.00 homestead deed filing fee)	July 2017	\$1,835.00			
	Access Credit Counseling		\$24.00 for credit counseling	March 2018	\$24.00			
17.	Within 1 year before you filed for bankrup promised to help you deal with your cree Do not include any payment or transfer that No Yes. Fill in the details.	ditors o		or transfer any prope	rty to anyone who			
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

Case 18-70957-FJS Doc 1 Filed 03/21/18 Entered 03/21/18 17:01:35 Desc Main Page 39 of 50 Case number (if known) Document Debtor 1 Magali Elena Fosse 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance closed, sold, Address (Number, Street, City, State and ZIP account number instrument before closing or Code) moved, or transfer transferred **BB & T** XXXX-7715 **July 2017** \$0.00 Checking PO Box 1847 □ Savings Wilson, NC 27894 ■ Money Market □ Brokerage Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) **BB & T** Nothing □ No PO Box 1847 Yes Wilson, NC 27894

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

NO
V

Yes. Fill in the details.

Name of Storage Facility
Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?

Address (Number, Street, City, State and ZIP Code)

Describe the contents to it?

Do you still

have it?

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Debtor 1 Magali Elena Fosse

Par	t 9: Identify Property You Hold or Control for	Someone Else							
23.	Do you hold or control any property that someofor someone.	one else owns? Include any prope	rty yo	ou borrowed from, are storing fo	r, or hold in trust				
	■ No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value				
Par	t 10: Give Details About Environmental Inform	ation							
For	the purpose of Part 10, the following definitions	apply:							
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, groun	_	•					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	law,	whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s was	ste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of whe	n the	y occurred.					
24.	Has any governmental unit notified you that you	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	/ironn	nental law? Include settlements	and orders.				
	■ No								
	Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case				
Par	t 11: Give Details About Your Business or Con	nnections to Any Business							
	Within 4 years before you filed for bankruptcy,	·	nv of	the following connections to an	v business?				
	☐ A sole proprietor or self-employed in a	•	-	-	,				
	☐ A member of a limited liability company			·					
	☐ A partner in a partnership								
	☐ An officer, director, or managing execu	tive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation								

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	■ No. None of the above applies. Go to Part 12.							
28.	☐ Yes. Check all that apply above and fill in the details below for each business.							
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed					
	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	■ No □ Yes. Fill in the details below.							
	Name Address (Number Street City State and ZIR Code)	Date Issued						

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Case number (if known) Debtor 1 Magali Elena Fosse

Part 12: Sign Below		
are true and correct. I understand that n	ent of Financial Affairs and any attachments, and I declare to haking a false statement, concealing property, or obtaining es up to \$250,000, or imprisonment for up to 20 years, or be	money or property by fraud in connection
/s/ Magali Elena Fosse		
Magali Elena Fosse	Signature of Debtor 2	
Signature of Debtor 1		
Date March 20, 2018	Date	
Did you attach additional pages to Your	Statement of Financial Affairs for Individuals Filing for Ba	nkruptcy (Official Form 107)?
■ No		
☐ Yes		
Did you pay or agree to pay someone w	ho is not an attorney to help you fill out bankruptcy forms?	?
■ No		
☐ Yes. Name of Person Attach th	e Bankruptcy Petition Preparer's Notice, Declaration, and Signa	ature (Official Form 119).

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Fill in this infor	mation to identify your	case:		
Debtor 1	Magali Elena Fos			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTR	RICT OF VIRGINIA	
Case number				
(if known)				☐ Check if this is an amended filing
Official Ec	rm 100			
Official Fo		n far ladi.	iduals Filing Under Chen	.1au 7
Statemer	nt of Intentio	n for indiv	<u>/iduals Filing Under Chap</u>	12/15
If you are an ind	ividual filing under cha	oter 7, you must fi	II out this form if:	
	e claims secured by yo	-		
	sed personal property a			and for the months of the Ptons
whiche	ever is earlier, unless th		you file your bankruptcy petition or by the date to time for cause. You must also send copies to	
on the	form			
	eople are filing together nd date the form.	in a joint case, bo	oth are equally responsible for supplying correc	t information. Both debtors must
J		la If mara space i	s needed, attach a separate sheet to this form. 0	On the ten of any additional nages
	our name and case nun		s needed, attach a separate sheet to this form. C	on the top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
-			D: Creditors Who Have Claims Secured by Prope	orty (Official Form 106D) fill in the
information be	elow.			
Identity the cr	editor and the property the	nat is collateral	What do you intend to do with the property the secures a debt?	hat Did you claim the property as exempt on Schedule C?
Creditor's E	BB&T *		■ Surrender the property.	□No
name:			Retain the property and redeem it.	_
Description of	2392 Cape Arbor D	rive Virginia	☐ Retain the property and enter into a Reaffirmation Agreement.	Yes
property	Beach, VA 23451 \		Retain the property and [explain]:	
securing debt:	Beach Cit County Value based on CN	// loss 100/	,	
	for cost of sale	IA less 10 /6		
Creditor's	BB&T *		■ Surrender the property.	□No
name:			Retain the property and redeem it.	<u>_</u>
Description of	2392 Cape Arbor D	rive Virginia	Retain the property and enter into a	Yes
property	Beach, VA 23451		Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:	Beach Cit County	_	and property and loverand.	
	Value based on CN for cost of sale	IA less 10%		
	. 3. 000. 01 0010			

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Case number (if known)

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes

Debtor 1 Magali Elena Fosse

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Debtor	1 <u>M</u>	lagali Elena Fosse	Case number (if known)
	_		
Part 3:	Sig	gn Below	
		y of perjury, I declare that I have indic is subject to an unexpired lease.	cated my intention about any property of my estate that secures a debt and any personal
X /s/	/ Mag	gali Elena Fosse	X
Ma	agali	Elena Fosse	Signature of Debtor 2
Się	gnatur	re of Debtor 1	
			Date

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Factorn	District 6	of Viro	rinia
Lastern	DISTITICT O	DI VILS	ziiiia

In re	re Magali Elena Fosse	Case N	No.	
	Debtor(s)	Chapte	er _	7
	DISCLOSURE OF COMPENSATION OF AT	TTORNEY FOI	R DE	BTOR
C	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that compensation paid to me, for services rendered or to be rendered on behalf of bankruptcy case is as follows:			
	For legal services, I have agreed to accept	\$		1,473.00
	Prior to the filing of this statement I have received	\$		1,473.00
	Balance Due			0.00
2.]	The source of the compensation paid to me was:			
	\blacksquare Debtor \square Other (specify)			
3. 7	The source of compensation to be paid to me is:			
	$\blacksquare \text{Debtor} \Box \text{Other } (specify)$			
l.	■ I have not agreed to share the above-disclosed compensation with any other pe	erson unless they are n	nembei	rs and associates of my law f
	☐ I have agreed to share the above-disclosed compensation with a person or persopy of the agreement, together with a list of the names of the people sharing it			
a l	In return for the above-disclosed fee, I have agreed to render legal service for all as a. Analysis of the debtor's financial situation, and rendering advice to the debtor i b. Preparation and filing of any petition, schedules, statement of affairs and plan v c. Representation of the debtor at the meeting of creditors and confirmation hearing d. Other provisions as needed:	n determining whethe which may be required	r to file l;	e a petition in bankruptcy;
б. I	By agreement with the debtor(s), the above-disclosed fee does not include the followard proceedings & appeals.	owing services:		

Doc 1 Filed 03/21/18 Entered 03/21/18 17:01:35 Desc Main Case 18-70957-FJS Document Page 47 of 50 **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

March 20, 2018	/s/ Heather J. Silkstone	
Date	Heather J. Silkstone 85773	
	Signature of Attorney	
	The Merna Law Group, PC	
	Name of Law Firm	
	3419 Virginia Beach Blvd.	
	#236	
	Virginia Beach, VA 23452	

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,223 (For all Cases Filed on or after 01/01/2018)

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED **STATES TRUSTEE** PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND **CLERK'S CM/ECF POLICY 9**

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROO	F OF SERVICE
ž ,	regoing Notice was served upon the debtor(s), the standing Chapter 13 trustee of the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class
Date	Signature of Attorney

E :II :	n this information to identify your asso:						
	n this information to identify your case:			eck one box 2A-1Supp:	only as d	irected in this form and	in Form
Deb	tor 1 Magali Elena Fosse			ги тоарр.			
	tor 2sif filing)		'	1. There is	s no pres	umption of abuse	
Unit	ed States Bankruptcy Court for the: Eastern District of \	/irginia	"	applies	will be n	o determine if a presun nade under <i>Chapter 7 I</i>	•
	e number			Calcul	ation (Off	icial Form 122A-2).	
(if kno	wn)					does not apply now be service but it could ap	
				☐ Check if	this is a	n amended filing	
Off	icial Form 122A - 1						
Ch	apter 7 Statement of Your Curi	rent Mor	nthly Inc	ome			12/15
attacl case qualit	•	nich the addition a presumption ion from Presum	nal information a of abuse becau	pplies. On th se you do not	e top of a	ny additional pages, writ narily consumer debts o	e your name and r because of
1.	What is your marital and filing status? Check one only	y.					
	■ Not married. Fill out Column A, lines 2-11.						
	\square Married and your spouse is filing with you. Fill out	both Columns	A and B, lines	2-11.			
	\square Married and your spouse is NOT filing with you. Y	ou and your s	spouse are:				
	☐ Living in the same household and are not legal	ly separated. I	Fill out both Col	lumns A and	B, lines 2	2-11.	
	☐ Living separately or are legally separated. Fill or penalty of perjury that you and your spouse are legiliving apart for reasons that do not include evading	gally separated	d under nonban	kruptcy law t	hat applie	es or that you and your	
10 th	Il in the average monthly income that you received from all s 01(10A). For example, if you are filing on September 15, the 6-mo e 6 months, add the income for all 6 months and divide the total b couses own the same rental property, put the income from that pro-	nth period would by 6. Fill in the res	be March 1 throusult. Do not include	igh August 31. de any income	If the amo amount m	ount of your monthly incomore than once. For examp	ne varied during le, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).			\$	0.00	\$	
3.	Alimony and maintenance payments. Do not include p Column B is filled in.	ayments from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly pai of you or your dependents, including child support. I from an unmarried partner, members of your household, and roommates. Include regular contributions from a spo- filled in. Do not include payments you listed on line 3.	Include regular your depender	contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession, o	r farm					
			tor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from a business, profession, or farm	. \$	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Deb	tor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from rental or other real property	\$0.00	Copy here ->	\$	0.00	\$	
7.	Interest, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

Case 18-70957-FJS Doc 1 Filed 03/21/18 Entered 03/21/18 17:01:35 Desc Main Page 49 of 50 Document Magali Elena Fosse Debtor 1 Case number (if known) Column A Column R Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 1,825.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 1.825.00 1.825.00 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 1,825.00 Multiply by 12 (the number of months in a year) **x** 12 21,900.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: ۷A Fill in the state in which you live. Fill in the number of people in your household. 1 58,759.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.

Go to Part 3 and fill out Form 122A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Magali Elena Fosse

Magali Elena Fosse

Signature of Debtor 1

Date March 20, 2018

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

PO BOX 13337 Philadelphia, PA 19101

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Arbors at Cape Hentry Condomin 4605 Pembroke Lake Circle Ste. 302 Virginia Beach, VA 23455

Phillips & Cohen Assoc Ltd 258 Chapman Rd Ste 205 Newark, DE 19702

Bank of America P.O. Box 982238 El Paso, TX 79998 Sears/CBNA PO Box 6283 Sioux Falls, SD 57117

Barclays Bank Delaware PO BOx 8803 Wilmington, DE 19899

SYNCB/Sams Club PO Box 965005 Orlando, FL 32896

Bayview Physician Services P.O. Box 7068 Portsmouth, VA 23707

WF CRD SVC Po Box 14517 Des Moines, IA 50306

BB&T P.O. Box 1847 Wilson, NC 27896

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BB&T * R MATTHEW HALL 823 E MAIN ST 11TH FLR Richmond, VA 23219

Capital One P.O. Box 30285 Salt Lake City, UT 84130

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